Aug/30/2017 10 05 35 AM Neurosurgery essent

Neurosurgery essentia health 218 720 6032

Mancini, Mario (MR # 4989940) DOB: 02/23/1972

Mancini, Mario

MRN: 4989940 Description: 45 year old male

Encounter Date: 08/29/2017

Office Visit 8/29/2017

Status: Open

ESSENTIA HEALTH-DULUTH
CLINIC NEUROSURGERY

Provider: Broadway, Steven J, MD (Neurosurgery)

Reason for Visit: Consult, Neck Paln; Referred by Unlisted, Provider

Consults

Osthus, Korrie H, PA-C (Physician Assistant) • Neurosurgery

Unsigned

Neurosurgery Consult

Essentia Health 8/29/2017

Korrle H. Osthus, PA-C

11007-041 FCI CST

Reason for Consult: Right arm pain and weakness Referring provider: Jenefer Southwick, PA-C

HPI:

Mario Mancini is a left-handed 45 year old male with a history of a neck injury 20 years ago who presents with right arm pain and weakness. He was working out 50 days ago when he experienced right arm weakness while lifting weights, denies popping or snapping at that time. He has Intermittent arm pain, numbness and a "buzzing" in the right arm and numbness in the right index finger; also has cramping in right hand. He has a history of chronic neck pain as well. Symptoms are worse upon waking and better after a warm shower and with use of ibuprofen and amitriptyline. He has received trigger point injections in his right trapezius that in the past have helped manage the pain.

Denies carpai tunnel, fevers, chest pain, shortness of breath, abdominal pain, and incontinence of bowel or bladder, difficulties with balance or recent falls. No pertinent past medical or surgical history.

He is currently an inmate at Sandstone federal prison; has a desk job using a computer. Denies tobacco use.

Medications

Amitriptyline 75 mg oral at night.

Allergies

Allergies

Allergen .

Penicillin V

Reactions

Social History Social History Substance Use Topics

Smoking status;

Never Smoker

GOVERNMENT PART 1 - 50

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6 20-CV-2532 (ECT/DTS)

EXHIBIT

USA 000583

CASE 0:20-cv-02532-ECT-DTS Doc. 178-6 Filed 07/24/23 Page 2 of 3

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Smokeless tobacco:

Never Used

Alcohol use

Not on file

Family History

No family history on file,

Review of Systems

General: no fevers Skin: no complaints Eyes: no complaints

Ears/Nose/Throat: no complaints

Respiratory: no complaints, denies shortness of breath Cardiovascular: no complaints; denies chest pain

Gastrointestinal: denies abdominal pain or bowel incontinence

Genitourinary: denies bladder incontinence Musculoskeletal: neck and right arm pain

Neurologic: right arm weakness, numbness, and cramping; denies decreased balance or

falls

Psychiatric: no complaints

Hematologic/Lymphatic/Immunologic: no complaints

Endocrine: no complaints, denies diabetes

Vital Signs

Vitals:

08/29/17 1506

BP:

132/82

Pulse:

80

Height:

1.727 m (5' 8")

Weight: BMI 106.6 kg (235 lb) 35.73

(Calculated):

Physical Exam:

APPEARANCE: 45 y/o pleasant male, alert and NAD; arrives in handcuff and leg shakles

accompanied by 2 prison personnel

SKIN: clear with no lesions HEAD: normocephaly.

EYES: eyelid(s) normal, conjunctiva clear, EOM(s) intact, no nystagmus

ENT: tongue midline, midline palate rise

NECK: full ROM, right neck tender to moderate palpation CHEST: good respiratory effort without retractions.

BACK/SPINE: non-tender thoracic spine

EXTREMITIES: arms are symmetric, nontender right arm, unable to flex right tricep; no

swelling or atropy in BUE; able to move all fingers

MOTOR: Moving all extremities independently; RUE 3/5 with elbow extension and 5/5 with

elbow flexion, arm abduction/adduction and grip. LUE 5/5 throughout.

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NEUROLOGIC: alert, oriented X 3, interaction normal, GCS: 15, unable to elicit DTRs bilaterally at biceps or brachioradialis, negative Hoffman's bilaterally, Cranial Nerves II-XII without deficit, speech clear, gait is steady

imaging

I personally reviewed and discussed in collaboration with Dr. Jared Broadway: MRI cervical 8/7/17:disc herniation at C5-6 and C6-7 with central canal narrowing and R>L neural foraminal narrowing.

Assessment/Plan

Mario Mancini is a healthy 45 year old male with cervical stenosis with right sided radiculopathy in the C6 distribution. Surgery has been offered and accepted; plan is for an anterior cervical discectomy and fusion at C5-6 and C6-7. Patient was seen and plan developed in collaboration with Jared Broadway, M.D., please see his documentation for surgical details and patient discussion.

Korrie H. Osthus, PA-C

Instructions

After Visit Summary (Printed 8/30/2017)

Additional Documentation

Vitals:

BP 132/82 Pulse 80 Ht 1.727 m (5' 8") Wt 106.6 kg (235 lb) BMI 35.73 kg/m² BSA 2,26 m²

Flowsheets:

Infection Screening, Rooming Form, Custom Formula Data

Encounter Info: Billing Info, History, Allergies, Detailed Report

Orders Placed

None

Medication Changes

As of 8/29/2017 5:53 PM

None

Visit Diagnoses

None